### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kevin Carl Archibald et al.

Group No.: 3626

Serial No.:

09/683,783

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Filed:

February 13, 2002

Examiner: Pass, Natalie

For:

SYSTEM, METHODS, AND

MEDIUM FOR FACILITATING

PROVIDING A QUOTE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

### TRANSMITTAL

1. Transmitted herewith is:
Transmittal and Amendment in response to Office Action dated August 29, 2006, and made final (27 pages)

## **STATUS**

2. Applicant claims small entity status. is other than a small entity.

# **EXTENSION OF TERM**

3.	The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.							
	(complete (a) or (b), as applicable)  (a) Applicant petitions for an extension of time under 37 C.F.R. 1.136  (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)							
Extension for response within:  first month			Other than small entity Fee	Small entity Fee (if applicable)				
			\$ 120.00	\$ 60.00				
		second month	\$ 450.00	\$ 225.00				
☐ third month ☐ fourth month ☐ fifth month			\$ 1,020.00	\$ 510.00 \$ 795.00 \$1,080.00				
			\$ 1,590.00					
			\$ 2,160.00					
			Fee Due	\$				
If an additional extension of time is required, please consider this a petition therefor.  (Check and complete the next item, if applicable)  An extension of months has already been secured. The fee paid therefor \$ is deducted from the total fee due for the total months of extension now requested.								
Extension fee due with this request \$								
OR								
(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.								

# FEE FOR CLAIMS

The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown 4. below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL. RATE FEE	OR	ADDITIONAL RATE FEE
		MINUS		=0	x \$25.00 = \$		x \$50.00 = \$
TOTAL INDEP.		MINUS		=0	x \$100.00 = \$		x \$200.00 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$180.00 = \$		+ \$360.00 = \$
				TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$	

				FEE \$	OK	FEE	\$
	(a)	$\boxtimes$	No additional fee for Claims is	required			
			OR				
	(b)		Total additional fee for claims	equired \$			
			FEE PAYMENT				
5.	Attached is a check in the sum of \$						
			e Deposit Account No. 01-2384 licate of this transmittal is attach				
			FEE DEFICIENCY				
6.		If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.					
			AND/OR				
		If any 2384.	additional fee for claims is requi	red, charge Deposi	t Acco	ount No	o. 01-
7.		Other:					
			a	MANA MAA/	14		

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